



The Delaware Health Care Commission (DHCC) Meeting

September 5, 2019
9:00 a.m. to 11:00 a.m.

Meeting Attendance and Minutes

Commission Members Present: Dr. Nancy Fan (Chair), Theodore W. Becker (Mayor of Lewes); Trinidad Navarro (DOI), Robert Dunleavy, LCSW (DSCYF), Secretary Rick Geisenberger (DOF), Dr. Edmondo Robinson (CCHS), Dr. Kathleen Matt (UD), Dr. Jan Lee (DHIN), and Dennis Rochford (Maritime Exchange for DE River & Bay)

Commission Member Absent: Richard Heffron

Meeting Facilitator: Dr. Nancy Fan (Chair)

Health Care Commission Staff: Elisabeth Scheneman, Executive Director and Marques Johnson, Administrative Specialist III

CALL TO ORDER

Dr. Fan called the meeting to order at approximately 9:02 a.m.

Approval of July 11, 2019 Meeting Minutes

The meeting convened at approximately 9:02 a.m. at the Del Tech Terry Campus in the Corporate Training Center located at 100 Campus Drive, Dover, Delaware. Dr. Fan welcomed those in attendance and requested that the commissioners review the draft minutes from the DHCC meeting held on July 11, 2019. August's meeting was cancelled. Hearing no comments or edits, Dr. Fan motioned for the minutes to be approved. Ted Becker motioned to approve the minutes, and Dr. Robinson seconded the motion for approval. All commissioners present were in favor of approving the July 11, 2019 meeting minutes. Motion carried. View the approved July 11, 2019, meeting minutes here:

https://publicmeetings.delaware.gov/Document/63173_Minutes-Final.pdf

BOARD BUSINESS

Opening the meeting, Dr. Fan called the commissioners attention to a letter of support in their meeting folder. The letter, dated August 22, 2019, was sent to Henrietta Johnson Medical Center. The DHCC staff reviewed and approved the letter request, as the request met the qualifications set by the Commission.

Strategic Retreat and Annual Report

The first item of business was a discussion around whether or not the commissioners should have another strategic retreat and if an annual report should be created. The Annual Report for 2011 was provided in the commissioners' folders. This is the last annual report issued by the Commission. Dr. Fan noted that many of the topics/issues the 2011 report are still relevant for the DHCC today, especially around access and workforce. Dr. Fan asked if the commissioners were all in agreement to have an annual report for 2019. A draft of the report would be shared with the Commission at the January 2020 meeting and then finalized and shared with the General Assembly. The commissioners were unanimously in agreement to have a report and agreed to Dr. Fan's proposed timeline for completion and distribution.

Next, Dr. Fan asked the commissioners if there was interest in having another strategic retreat this fall. A retreat was held last fall in November 2018. Discussion topics could include follow-up on the 2018 retreat action items, creating new action items for 2020, and discussion around the contents of the annual report. Dr. Robinson and Secretary Geisenberger asked about timing for a report and retreat. Is there enough time to complete both with the holidays and also staff capacity? It was mentioned that some of the report could be updates on what has been done this past year. An outline of the annual report could also be shared at the retreat so there is a starting point and a shell for the report. The commissioners were in agreement to have another retreat this fall. A doodle poll will be sent to commissioners to secure a date. The retreat will be a working meeting for the board and open to the public.

Dr. Lee shared the 2011 annual report had a mission statement and it would have been great to know that one existed. Dr. Robinson suggested at the October meeting, in advance to the retreat, the commissioners could discuss what sections should be included in the report.

POLICY DEVELOPMENT

Children's Behavioral Health

For the month of September, the DHCC Seasonal Calendar includes an update on children's behavioral health. Commissioner Bob Dunleavy presented on the topic. Bob serves as the Division Director with the Delaware Department of Services for Children, Youth and Their Families (DSCYF).

Bob opened with remarks that children's behavioral health is really tied into adult physical and mental health. Medical health and physical health are joined together. We all began life as a kid, and childhood experiences are the foundation of adulthood. The Commission intersects with children's behavioral health in various ways. For example, in the commission's DIMER and DIDER discussions, kids need physicians and there are shortages in different specialties as well as general practice in certain parts of the state. Psychiatry is one example. Bob pointed out that Dr. Richard Margolis, DSCYF Medical Director and child psychologist, was in attendance.

DSCYF is comprised of four divisions: three service divisions and one management support division:

[Division of Prevention and Behavioral Health Services \(DPBHS\)](#) (Many years known as child mental health. The name was changed several years ago to add prevention, not just treatment)

[Division of Family Services \(DFS\)](#) (child protective services)

[Division of Management Support Services \(DMSS\)](#) (support division)

[Division of Youth Rehabilitative Services \(DYRS\)](#) (juvenile justice probation and parole)

Bob shared greater detail about the Division of Prevention and Behavioral Health Services – vision, mission and who they serve (a heavy emphasis on serving the family). The division generally serves the uninsured and the Medicaid enrolled population although will serve families with inadequate or unaffordable insurance. The division provides prevention and early intervention services that are school and community based. Much of the funding the division receives comes through block grants and Delaware General Funds. Bob discussed the division’s care coordination approach. The Department has two treatment centers in the state – one in Middletown and one in New Castle. The Terry Children’s Center in New Castle has six crisis beds. An insured child would generally go to an inpatient hospital.

Bob shared some final thoughts – we have two systems, the child’s (DSCYF) and adult (DHSS). Traditionally they are segregated because funding is segregated. The departments have partnered in the past, but recently the partnership has accelerated. Counterparts at each department are working together to smoothly transition kids to adult system.

DSCYF receives a number of grants, totaling more than \$20 million. Dr. Margolis highlighted the Delaware Child Psychiatry Access Program, a five-year grant from Health Resources Service Administration (HRSA). The grant looks at access and workforce issues. There is a very limited supply of child psychiatrists and there is a tremendous need to support primary care pediatric physicians and nurse practitioners. Currently the grant is focused on Sussex County because it is their most underserved area. The project will provide “curbside” consultation and training opportunities to strengthen primary care practitioner skills in diagnosing and managing youth behavioral health concerns.

Secretary Geisenberger asked if Dr. Margolis and Bob could speak to workforce development around prevention and early intervention. State and opportunity funding is supporting schools offering trauma informed care. Is there an available workforce to support the work? Bob replied, “Maybe.” With the number of years of schooling needed, the financial cost of education, and low starting salary – developing a workforce of social workers is a challenge. DSCYF is looking at internships and loan assistance to those serving in an underserved area.

Dean Matt shared we tend to always look at traditional ways when we talk about using a workforce. If we could look more comprehensively, more creatively, and how we partner with academic institutions to really look at how we channel people into different workforce areas.

There was some discussion between the commissioners about telehealth services, billing, workflow, and embedding behavioral health consultants.

A copy of Bob’s presentation is available at:

<https://dhss.delaware.gov/dhss/dhcc/files/chldrenbehvrlhlthprsttion.pdf>

Public Comment:

How does special education connect identifying behavioral problems? Bob shared the first stop at schools should be the student sees the mental health professional.

The Medical Society of Delaware asked if there is any communication they can be shared regarding curbside service, and asked if the Delaware Child Psychiatry Access Program grant will look at other counties (besides Sussex)? Dr. Margolis shared the grant is focused now on Sussex now, then Kent, and finally New Castle. He will provide the Medical Society with curbside information.

UPDATES

DIMER (Delaware Institute of Medical Education and Research)

A DIMER/DIDER Collaborative Board Meeting was held on September 4, 2019 at the University of Delaware's STAR Health Sciences Complex. Sherman Townsend, the DIMER chair, provided a meeting summary and update on the DIMER program. First, Sherman expressed the importance of a DHCC annual report (including DIMER and DIDER). The recent board meeting was set-up to stimulate deep discussions about marketing healthcare to students. DIMER needs to talk to students about medical education much earlier in the cycle. DIMER has partnered with the Delaware Health Sciences Alliance (DHSA) this past year and there has been a lot of effort to outreach to students at the high school level. There are outreach events planned this fall in New Castle and Kent counties, with plans for an event in Sussex County at a later date. This past year, DIMER had its largest first year class ever with 38 students (20 from Sidney Kimmel Medical College (SKMC) and 18 from Philadelphia College for Osteopathic Medicine (PCOM)). DIMER has seen an increase in the number of applicants from Sussex County. The Christiana Care Branch Campus now includes PCOM students in addition to SKMC. Bayhealth will be starting a residency program in 2021 with eight students. Sherman shared the DIMER relationship with the schools and the schools with each other is great. Sherman shared DIMER's budget request – increase funding for PCOM, tuition assistance was highlighted. DIMER fully supports student loan repayment program. DIMER is also celebrating 50 years in 2019.

Dr. Fan asked Sherman if he and the DIMER board could work with Eschalla Clarke (the program manager) on what items DIMER would like to highlight in the DHCC Annual Report.

DIDER (Delaware Institute for Dental Education and Research)

Ted Becker provided a DIDER update. The relationship with Temple is strong, but challenged by tuition reimbursement situation. He shared the distribution of dental workforce and services downstate remains a challenge. In 2012, there were 380 providers with 45% being over the age of 55 and additional 25% over age of 65. One of the biggest obstacles for dentists is the cost of education and cost of setting up a practice. Ted shared loan reimbursement and tuition assistance is very critical. On dental exams, Delaware dentists have a 92% pass rate. The question becomes how do have practitioners become more evenly distributed across the state. In 2016, 65% of dentists that did a residency at Christiana stayed in Delaware and more recently 74% stayed in Delaware. The importance of dental residency programs in Delaware is critical. A residency program downstate could help with the dental workforce distribution. With Medicaid now including dental, is there enough providers?

Dr. Fan mentioned DIDER hosted a dental conference in July 2019 to discuss dental access and workforce. Secretary Geisenberger asked about setting up a practice. Dr. Nick Conte, Dental Director with the Division of Public Health and also a DIDER board member, shared information about the dental practice model. He also spoke about Delaware's capacity issue.

Dr. Robinson spoke about DIDER items the Commission could discuss at a policy level. First, what are the

advanced practice providers in dental and regulations? Can the Commission/DIDER make recommendations that might lead toward a more robust usage of such clinicians? Second, with respects to licensure, the Commission should make a recommendation on what can or should be changed around licensure. Dr. Conte shared Delaware is the only state with an independent license exam and recommended Delaware look at exam's process.

Dr. Walker added that with the opening up of dental Medicaid, this is an important time to focus on access, capacity, licensure barriers, and create a system that works for everyone.

Dr. Fan commented policy development items could be discussed at the Strategic Retreat. She also asked if any commissioner was interested in serving on the DIMER board. The appointment is currently vacant. If interested, they should email Elisabeth Scheneman.

State Loan Repayment Program (SLRP)

Dr. Fan started the loan repayment update by first sharing that in the commissioner's folder was a new State Loan Repayment Program brochure developed by the Health Care Commission staff. The brochure contains information about how the SLRP works, who qualifies, how to apply, etc.

HB 257 is legislation that was introduced last session that would create a state sponsored loan repayment program. Discussions still continue around a state sponsored program. The DHCC is putting together an advisory council to discuss how to make a "state" loan repayment program operational.

Secretary Geisenberger shared he and Commissioner Navarro are members of the Delaware Plans Management Board which looks at the 529 plan to help people save for college. There is a lot of other activity going on as well for example, Career Pathways, allied health program, Delaware Workforce Investment Board, etc. As we think about the retreat, Secretary Geisenberger noted he is hearing the theme of workforce development and what is the role of the DHCC with respect to trying to drive efforts and working with other groups. The commissioners agreed it would be good to find ways to coordinate.

Reinsurance Program

Elisabeth shared an update on the reinsurance program. At the July DHCC meeting, Steven Costantino, DHSS Director of Health Care Reform, spoke about the reinsurance program. Delaware submitted an application and it was approved on August 20, 2019, for a 1332 State Innovation Waiver under the Affordable Care Act to create a reinsurance program beginning in 2020 as a way to reduce premiums by up to 20 percent in Delaware's individual health insurance market. DHCC is now taking the next steps to operationalize. DHCC staff met with Maryland Health Exchange Benefit staff to learn about how they operationalize their reinsurance program. DHCC will also be working with the Department of Insurance and CMS as well. [DHCC's website](#) has a section dedicated to reinsurance and includes informational material about the program and 1332 State Innovation Waiver.

Benchmark

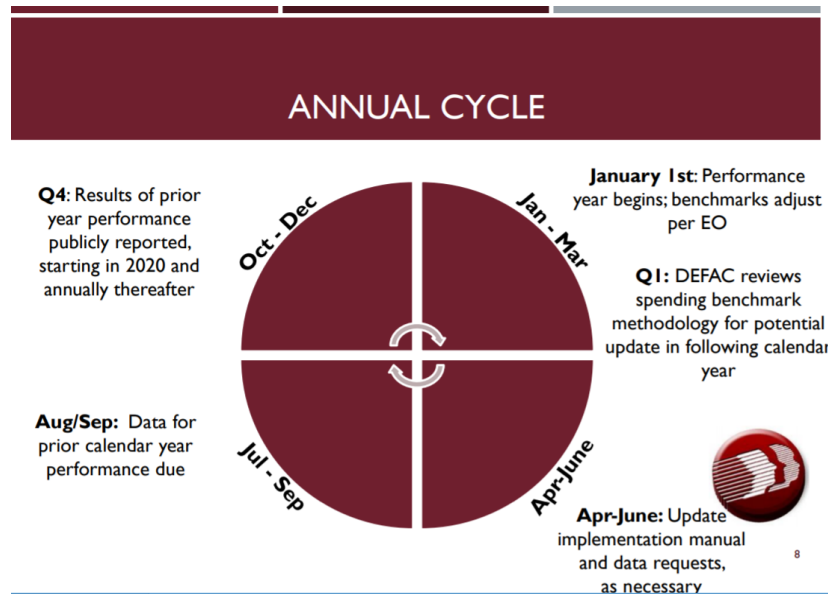
Elisabeth provided an update on the Benchmark to share progress made and an update on the activities since Executive Order 25 was signed in November 2018. First, Elisabeth provided a brief "refresher" on the Benchmark. Next she highlighted the 2019 implementation progress:

- Implementation Manual released January 31, 2019 with an update released June 6, 2019

- DHCC hosted informational webinars with insurers
- Developed and disseminated FAQs documents
- Resources made available <https://dhss.delaware.gov/dhcc/global.html>

The DHCC started collecting 2018 Spending and Quality baseline data on August 1, 2019 and is now in the process of validating the data. This is summary level data.

Elisabeth shared the Benchmark's annual cycle.



2019 is different in that the DHCC is collecting 2018 baseline data. 2019 is the first performance year.

Elisabeth highlighted the DHCC's next steps. Health Care Commission staff will examine their data request procedures and clarify any common errors or misunderstandings. Staff will develop strategies to engage providers and community partners in regular and ongoing forums with the state and with each other.

Elisabeth's concluded with a brief highlight of other benchmark activities happening across the country. Delaware is the only state currently looking at quality benchmarks.

Elisabeth's presentation is available at:

https://dhss.delaware.gov/dhss/dhcc/files/benchmarkpresentation_090519.pdf

Secretary Geisenberger asked if 2019 quality benchmarks are based on 2017 numbers. Dr. Walker shared the quality numbers were set on the most current data available and varied based on the quality measure.

Dr. Jan Lee inquired when would the Health Care Claims Database (HCCD) be used as the source rather than asking the payers to make summary submissions. Dr. Walker shared DHSS shares a common interest in having DHIN support the benchmarking process. A meeting is set-up later this month with DHIN and DHSS to discuss opportunities.

In the interest of time and with other items still on the meeting agenda, Dr. Fan announced the Primary Care Collaborative and SIM closeout update would be moved to another meeting.

Marketplace

Commissioner Navarro provided a Marketplace update. The Department of Insurance (DOI) received Highmark's annual rate filing. Highmark, the only insurer continuing to offer insurance coverage in Delaware's individual market, has proposed a 5.8% decrease for 2020, and DOI negotiated a 6% decrease. With the approval of the 1332 State Innovation Waiver, Highmark will need to refile. The Commissioner shared the market has stabilized and with the reinsurance program there is hope the number will be around 20.

Also, with regards to the Primary Care Collaborative, the Commissioner shared DOI has met with Milbank Memorial Fund to discuss what other states are doing around primary care spend. DOI has also completed the RFP process to stand up the new DOI Office of Value-Based Health Care Delivery.

The Commissioner shared the pharmacy benefit manager bill passed which will allow DOI to investigate the finances of PBMs (Pharmacy Benefit Managers).

ADJOURN

Dr. Fan asked if there were any questions or new business from the Commissioners. Hearing none, she asked if there was public comment.

Public Comment:

Jill Fredel, Communications Director with DHSS, shared there was a spike in suspected overdose deaths over Labor Day weekend, including four in Sussex County. In response, the Division of Public Health will hold a Community Naloxone Training and Distribution event in Millsboro on Friday, September 6, 2019. DPH will distribute free naloxone kits to members of the public from 10 a.m. to 2 p.m. at Millsboro Fire Company.

Maria Copps-Butler inquired if speech language pathologists could be considered for the federal state loan repayment program (SLRP). Dr. Fan suggested the federal SLRP review.

Erin Goldner with Hope Street DE provided comments on addiction care and methadone.

Hearing no other business, Dr. Fan adjourned the meeting at approximately 11:17 a.m.

Next Meeting

The next DHCC meeting will be held on Thursday, October 3, 2019 at Delaware Health and Social Services campus located at 100 Campus Drive, Dover, Delaware located in the Del Tech Terry Campus; Corporate Training Center, 400 A/B from 9:00 a.m. to 11:00 a.m.

Public Meeting Attendees 9/5/19

R.W. Munson, Jr.	United Medical
Robin Taylor	Department of Insurance
Fleur McKendell	Department of Insurance
Jan Brunory	Department of Insurance
John Gentile	Office of Senator Carper
Jill Fredel	Department of Health and Social Services
Lolita Lopez	Westside Family Healthcare
Elizabeth Zubaca	Hamilton Goodman Partners
Brian Olson	LaRed Health Center
Mary Fenimore	Medical Society of Delaware
Sherman Townsend	DIMER
Mary Perkins	Goeins-Williams Associates, Inc.
Sheila Grant	AARP
Nina Figueroa	State Benefits Office
Yvette Santiago	Nemours
Nick Conte	Division of Public Health
Anthony Onughen	United Medical
Shamarla McCoy	Planned Parenthood of DE
Jose Tieso	Medicaid
John Dodd	BDC – Health IT
Victoria Brennan	CGO
Paula Roy	Delaware Chiropractic
Erin Ridout	DCADV
Kathy Collison	Division of Public Health
Richard Margolis	Kids Department
Maria Copps-Butler	SLP & ASL
Erin Goldner	Hope Street DE
Liz Brown	DMMA
Christine Schultz	PG&S